

CLIENT REGISTRATION FORM

FOR DEPARTMENT USE ONLY: CONTRACTOR ID

BUILDING INSPECTION, PO BOX 40, ROOM 118 CHESTERFIELD VA 23832

Office: 804-748-1057; Fax: 804-751-4713; www.chesterfield.gov/bi
Connect: 804-751-4444; Inspection Scheduling: 804-751-4990

If you are a licensed CONTRACTOR and this is the first time you are working in Chesterfield County, please complete the Contractor Registration Form below. When address, phone number, licensing information or agent name changes, please let us know so your business information stays up-to-date. Please attach copies of your business license issued by a locality in the state of Virginia. If you do not have a business license, please contact the Commissioner of Revenue at 804-748-1281 for more information.

	BUSINESS NAME (AS IT APPEARS ON YOUR CONTRACTOR'S LICENSE):							
	TRADING AS (AS IT APPEARS ON YOUR CONTRACTOR'S LICENSE):							
	FEDERAL ID# OR OWNER/DEVELOPER/ARCHITECT SSN:							
	DAYTIME PHONE NUMBER :	X NUMBER:			CELL OR ALTERNATIVE PHONE NUMBER:			
	STREET ADDRESS:							
	MAILING ADDRESS (IF DIFFERENT FROM STREET ADDRESS):			E-MAIL ADDRESS:				
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CONTRACTOR REGISTRATION	CITY/STATE/ZIP:							
IST	List agents approved for signature on applications below:							
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OR R								
RACT	2.		5.					
CONT	3.		6.					
	STATE CONTRACTOR'S LICENSE NUMBER: EXPIRATION DATE:		CLASS OF LICENSE (PLEASE CIRCLE ONE)			EASE CIRCLE ONE)		
					Α	В	С	
	LICENSE SPECIALTIES:							
	MASTER TRADE CARD HOLDER NAME (IF APPLICABLE):	MASTER TRADE CARI	D NUMBER:	TRADE:			EXPIRATION DATE:	
	MASTER TRADE CARD HOLDER NAME (IF APPLICABLE):	MASTER TRADE CARD NUMBER:		TRADE:			EXPIRATION DATE:	
	MASTER TRADE CARD HOLDER NAME (IF APPLICABLE) :	MASTER TRADE CARD NUMBER:		TRADE:			EXPIRATION DATE:	
	BUSINESS LICENSE NUMBER:	_1	LOCALITY W	I HERE BUSINE	SS LICENSE WAS ISSUE	ED:	I	